

County: Douglas
ST. FRANCIS IN THE PARK H/REHABILITATION
1800 NEW YORK AVENUE

Facility ID: 8350

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SUPERIOR 54880 Phone: (715) 394-5591
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 168
Total Licensed Bed Capacity (12/31/01): 189
Number of Residents on 12/31/01: 162

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 152

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No					1 - 4 Years	34.6		
Supp. Home Care-Personal Care	No					More Than 4 Years	48.8		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.6	Under 65	6.2		16.7		
Day Services	No	Mental Illness (Org./Psy)	27.8	65 - 74	7.4				
Respite Care	No	Mental Illness (Other)	9.3	75 - 84	30.9		100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	46.9	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.6	Full-Time Equivalent			
Congregate Meals	No	Cancer	1.9			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	1.2		100.0	(12/31/01)			
Other Meals	No	Cardiovascular	8.6	65 & Over	93.8				
Transportation	No	Cerebrovascular	7.4			RNs		5.9	
Referral Service	No	Diabetes	1.9	Sex	%	LPNs		4.7	
Other Services	Yes	Respiratory	4.3			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	37.0	Male	23.5	Aides, & Orderlies			
Mentally Ill	Yes			Female	76.5				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

Medi care (Title 18)			Medi caid (Title 19)			Other			Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	0	0.0	0	3	2.7	121	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	1.9
Skilled Care	13	100.0	330	81	71.7	103	0	0.0	0	36	100.0	135	0	0.0	0	0	0.0	0	130	80.2
Intermediate	---	---	---	29	25.7	85	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	29	17.9
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	13	100.0		113	100.0		0	0.0		36	100.0		0	0.0		0	0.0		162	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				

Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	9.3	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	0.0	Bathing	6.8	63.0	30.2	162
Other Nursing Homes	11.5	Dressing	10.5	62.3	27.2	162
Acute Care Hospitals	76.4	Transferring	40.1	42.0	17.9	162
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	27.2	49.4	23.5	162
Rehabilitation Hospitals	0.0	Eating	61.1	22.8	16.0	162
Other Locations	2.7	*****				
Total Number of Admissions	182	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	5.6	Receiving Respiratory Care		7.4
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	56.8	Receiving Tracheostomy Care		1.2
Private Home/With Home Health	46.0	Occ/Freq. Incontinent of Bowel	24.1	Receiving Suctioning		0.0
Other Nursing Homes	3.7			Receiving Ostomy Care		3.1
Acute Care Hospitals	19.0	Mobility		Receiving Tube Feeding		1.9
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	4.3	Receiving Mechanically Altered Diets		31.5
Rehabilitation Hospitals	0.0					
Other Locations	6.7	Skin Care		Other Resident Characteristics		
Deaths	24.5	With Pressure Sores	3.1	Have Advance Directives		86.4
Total Number of Discharges		With Rashes	3.1	Medications		
(Including Deaths)	163			Receiving Psychoactive Drugs		61.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	79.8	89.4	0.89	83.8	0.95	84.3	0.95	84.6	0.94
Current Residents from In-County	95.7	82.7	1.16	84.9	1.13	82.7	1.16	77.0	1.24
Admissions from In-County, Still Residing	27.5	25.4	1.08	21.5	1.28	21.6	1.27	20.8	1.32
Admissions/Average Daily Census	119.7	117.0	1.02	155.8	0.77	137.9	0.87	128.9	0.93
Discharges/Average Daily Census	107.2	116.8	0.92	156.2	0.69	139.0	0.77	130.0	0.82
Discharges To Private Residence/Average Daily Census	49.3	42.1	1.17	61.3	0.81	55.2	0.89	52.8	0.94
Residents Receiving Skilled Care	82.1	93.4	0.88	93.3	0.88	91.8	0.89	85.3	0.96
Residents Aged 65 and Older	93.8	96.2	0.97	92.7	1.01	92.5	1.01	87.5	1.07
Title 19 (Medicaid) Funded Residents	69.8	57.0	1.22	64.8	1.08	64.3	1.09	68.7	1.02
Private Pay Funded Residents	22.2	35.6	0.62	23.3	0.95	25.6	0.87	22.0	1.01
Developmentally Disabled Residents	0.6	0.6	0.99	0.9	0.70	1.2	0.52	7.6	0.08
Mentally Ill Residents	37.0	37.4	0.99	37.7	0.98	37.4	0.99	33.8	1.10
General Medical Service Residents	37.0	21.4	1.73	21.3	1.74	21.2	1.75	19.4	1.91
Impaired ADL (Mean)	47.0	51.7	0.91	49.6	0.95	49.6	0.95	49.3	0.95
Psychological Problems	61.1	52.8	1.16	53.5	1.14	54.1	1.13	51.9	1.18
Nursing Care Required (Mean)	6.4	6.4	1.00	6.5	0.99	6.5	0.98	7.3	0.87